

Receipt

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

REQUEST FOR CORRECTED FILING RECEIPT

Atty. Docket No.

BMC1100-1



In re Application of: **Walter R. Bodwell, et al.**

Application Number: **09/710,214**

Filed: **11/10/00**

For: **System and Method for Mediating a Web Page**

Group Art Unit: **2152**

Examiner: **Unknown**

Certification Under 37 C.F.R. § 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Assistant Commissioner of Patents, Office of Initial Patent Examination, Customer Service Center, Washington, D.C. 20231, on March 6, 2001.

Janice Pampell
Janice Pampell

Hon. Asst. Commissioner of Patents
Washington, D.C. 20231

Dear Sir:

1. Attached is a copy of the official filing receipt received from the PTO in the above application for which issuance of a corrected filing receipt is respectfully requested.
2. There is an error with respect to the following data, which is:

| | | |
|-------------------------------------|---------------------|--------|
| <input type="checkbox"/> | incorrectly entered | and/or |
| <input checked="" type="checkbox"/> | omitted | |

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| | | Error in | | Correct data |
|----|-------------------------------------|------------------------------|----|---|
| A. | <input type="checkbox"/> | Applicant's name and Address | A. | |
| B. | <input checked="" type="checkbox"/> | Inventor(s) name and Address | B. | Please add the following information under the "Applicant(s)" section: Walter R. Bodwell, Austin, TX Clay Davis, Austin, TX Michael C. Klobe, Austin, TX |
| C. | <input type="checkbox"/> | Title | C. | |
| D. | <input type="checkbox"/> | Filing Date | D. | |
| E. | <input type="checkbox"/> | Application Number | E. | |
| F. | <input checked="" type="checkbox"/> | Other | F. | The priority information is omitted. After the section entitled "Continuing Data as Claimed by Applicant", please insert: This application claims the benefit of U.S. Provisional Application Serial No. 60/165,102 filed 11/12/99. |

3. ☐ (complete the following applicable item)

| | | |
|----|-------------------------------------|--|
| A. | <input checked="" type="checkbox"/> | The correction(s) is/are not due to any error by applicant(s) and no fee is due. OR |
| B. | <input type="checkbox"/> | At least one of the above corrections is due to applicant's error and the fee therefor, under 37 C.F.R. § 1.19(h), of \$25.00 is paid as follows |
| | <input type="checkbox"/> | Enclosed is a check for \$25.00 |
| | <input type="checkbox"/> | Charge Deposit Account No. 50-0456 |

3/5/01
Date

Steven R. Sprinkle
Reg. No.: 40,825



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| APPLICATION NUMBER | FILING DATE | GRP ART UNIT | FIL FEE REC'D | ATTY. DOCKET NO | DRAWINGS | TOT CLAIMS | IND CLAIMS |
|--------------------|-------------|--------------|---------------|-----------------|----------|------------|------------|
| 09/710,214 | 11/10/2000 | 2152 | 588 | BMC1100-1 | 2 | 37 | 5 |

Steven R Sprinkle
Gray Cary Ware & Freidenrich LLP
100 Congress Avenue Suite 1440
Austin, TX 78701



FILING RECEIPT



OC000000005766228

Date Mailed: 02/14/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s) *walter e. Bodwell, austin, TX / clay davis, austin, TX / michael c. Klobe, austin, TX*

Continuing Data as Claimed by Applicant *This application claims the benefit of U.S. Provisional appn. 60/165,102 Filed 11-12-99*

Foreign Applications

If Required, Foreign Filing License Granted 02/14/2001

**** SMALL ENTITY ****

Title

System and method of mediating a web page

Preliminary Class

709

Data entry by : MOLLISH, CHRISTINE

Team : OIPE

Date: 02/14/2001



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Title 35, United States Code, Section 184
Title 37, Code of Federal Regulations, 5.11 & 5.15**

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PLEASE NOTE the following information about the Filing Receipt:

- The articles such as "a," "an" and "the" are not included as the first words in the title of an application. They are considered to be unnecessary to the understanding of the title.
- The words "new," "improved," "improvements in" or "relating to" are not included as first words in the title of an application because a patent application, by nature, is a new idea or improvement.
- The title may be truncated if it consists of more than 600 characters (letters and spaces combined).
- The docket number allows a maximum of 25 characters.
- If your application was submitted under 37 CFR 1.10, your filing date should be the "date in" found on the Express Mail label. If there is a discrepancy, you should submit a request for a corrected Filing Receipt along with a copy of the Express Mail label showing the "date in."
- The title is recorded in sentence case.

Any corrections that may need to be done to your Filing Receipt should be directed to:

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Bib Data Sheet

CONFIRMATION NO. 4602

| | | | | |
|--|---|--------------------------------|---|---|
| SERIAL NUMBER 09/710,214 | FILING DATE 11/10/2000 RULE | CLASS | GROUP ART UNIT 2152 | ATTORNEY DOCKET NO. BMC1100-1 |
| APPLICANTS Walter R. Bodwell, Austin, TX; Clay Davis, Austin, TX; Michael C. Klobe, Austin, TX; | | | | |
| ** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/165,102 11/12/1999 | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 02/14/2001 | | | | |
| ** SMALL ENTITY ** | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | STATE OR COUNTRY TX | SHEETS DRAWING 2 | TOTAL CLAIMS 37 |
| Verified and Acknowledged Examiner's Signature _____ Initials _____ | | INDEPENDENT CLAIMS 5 | | |
| ADDRESS 25094 | | | | |
| TITLE System and method of mediating a web page | | | | |
| FILING FEE RECEIVED 653 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |